

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type:: REGULAR
Subject Matter:: UTILITY
CD-ROM or CD-R?:: NONE
Title:: HOUSING FOR ELECTORNIC DEVICE
WEARABLE ON USER'S FINGER
Attorney Docket Number:: 244707US17
Total Drawing Sheets:: 13

INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: United States
Status:: FULL CAPACITY
Given Name:: Kai
Family Name:: Marcucelli
City of Residence:: Needham
State or Province of Residence:: Massachusetts
Country of Residence:: United States
Street of Mailing Address:: c/o Fila Sport, Inc.
83 Pine Street
City of Mailing Address:: Peabody
State or Province of Mailing Address:: Massachusetts
Country of Mailing Address:: United States
Postal or Zip Code of Mailing Address:: 01960

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: United States
Status:: FULL CAPACITY
Given Name:: Craig
Family Name:: Wojcieszak
City of Residence:: Lee
State or Province of Residence:: New Hampshire
Country of Residence:: United States
Street of Mailing Address:: c/o Fila Sport, Inc.
83 Pine Street
City of Mailing Address:: Peabody
State or Province of Mailing Address:: Massachusetts
Country of Mailing Address:: United States
Postal or Zip Code of Mailing Address:: 01960

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: United States
Status:: FULL CAPACITY
Given Name:: Edward
Middle Name:: C.
Family Name:: Frederick
City of Residence:: Brentwood
State or Province of Residence:: New Hampshire
Country of Residence:: United States
Street of Mailing Address:: c/o Fila Sport, Inc.
83 Pine Street
City of Mailing Address:: Peabody
State or Province of Mailing Address:: Massachusetts
Country of Mailing Address:: United States
Postal or Zip Code of Mailing Address:: 01960

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	119(e) of	60/456,549	03/24/03

ASSIGNMENT INFORMATION

Assignee Name:: Fila Luxembourg S.A.R.L.
Street of Mailing Address:: 46/A Avenue J. F. Kennedy
City of Mailing Address:: Luxembourg
Country of Mailing Address:: Luxembourg
Postal or Zip Code of Mailing Address:: L-1855